DISTRIBUTION NEW MEXICO OIL CONSERVATION CON SION Form C-104 ANTA FE 1 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 7 Effective 1-1-65 ILE AND .s.g.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS AND OFFICE RECEIVED OIL ŀ TRANSPORTER GAS OPERATOR DEC = 1974 PRORATION OFFICE Operator TEXACO Inc. <u>o. c. c</u> Address ARTESIA, OFFICE P. O. Box 728 Nobbe, New Mexico 88240 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Dry Gas Change in Ownership Casinghead Gas Condensate Change of status from shut-in to pro-If change of ownership give name and address of previous II. DESCRIPTION OF WELL AND LEASE No Poor Name, Including Pormation Kind of Lease Lease No. State, Federal or Fee 26 North Renson Queen Grayburg 033775 660 Unit Letter Feet From The Line and 660 Feet From The Line of Section Township 18 8 Range 50 K , NMPM, County Eddy III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) or Condensate O. Box 1510. Midland. Town 7:3701 iress (Give address to which approved copy of this form is to be sent) Taxas - Hay Maxico Pipeline Company Name of Authorized Transporter of Casinghead Gos or Dry Gas Not connected Twp. Is gas actually connected? If well produces oil or liquids, give location of tanks, 28 18 8 30 1 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Gas Well Oil Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v. Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Fred. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GK, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Purping Casing Pressure 11-5-74 Tubing Pressure Length of Test Choke Size Actual Prod. During Test OH-Bbis. Water - Bbis. Gas - MCF 20 TET **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size OIL CONSERVATION COMMISSION DEC 4 1974 VI. CERTIFICATE OF COMPLIANCE DEC APPROVED I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. BY OIL AND GAS INSPECTOR

Assistant Distric

11-27-74

(Title)

(Date)

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply

libbbe, Hew Mextee 28240

X

and the state of t

Change of status from shut-in w

Sangkon

465

The second second second